DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Facility Information

Facility Name: CHADWICK II - B (0010026)

Address: 5020 CHADWICK STREET, WESTON, WI 54476

License Status: REGULAR

Licensed/Certified/Registered 07/02/2003

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History						
Survey ID: 0096153	End Date: 11/21/2005	Type: OTHER	Purpose: COMPLAINT			
Results: NO STATEMENT OF DEFICIENCY ISSUED						
Survey ID: 0095889	End Date: 10/19/2005	Type: OTHER	Purpose: OTHER			
Results: NO STATEMENT OF DEFICIENCY ISSUED						
Survey ID: 0094491	End Date: 03/30/2005	Type: STANDARD	Purpose: SURVEY			
Results: STATEMENT OF DEFICIENCY ISSUED						
Statement of Deficiency: #10009397 Served 04/08/2005						
	Deficiencies Cited 88.05(3)(a)	Subject Area HOME ENVIRONMENT		Compliance Verified 12/21/2005	Corrected Yes	

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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P.O. Box 2969
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Complaint History

Date Complaint Received: 10/19/2005 Date Investigation Completed: 11/21/2005

Subject Area(s) Result SOD #

PHYSICAL PLANTS & SAFETY HAZARDS PROGRAM SERVICES

NOT SUBSTANTIATED NOT SUBSTANTIATED

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